

## AFFIDAVIT OF DETACHMENT OF MOBILE HOME APPLICATION

## MICHIGAN DEPARTMENT OF STATE OFFICE OF CUSTOMER RECORDS

PLEASE PRINT OR TYPE INFORMATION REQUESTED

## FOR DEPARTMENT USE ONLY Instructions: • Submit notarized affidavit application. FILED AND ACCEPTED BY THE DEPARTMENT ON: • Once approved, the affidavit application will be returned to the person listed in section 3. If section 3 is blank, the affidavit will be returned to the owner listed in section 1. The affidavit must then be recorded at the Register of Deeds in the county where the real property is located. • There is no filing fee for the Affidavit of Detachment. • Affidavit will be returned if not complete. **SECTION 1. OWNER AND MOBILE HOME INFORMATION** NAME OF OWNER(S) DAYTIME TELEPHONE NUMBER MOBILE HOME PROPERTY ADDRESS STATE ZIP CITY YEAR MANUFACTURER MANUFACTURER'S SERIAL NO. LEGAL DESCRIPTION OF THE REAL PROPERTY TO WHICH THE MOBILE HOME IS AFFIXED **SECTION 2. CERTIFICATION** I certify that the mobile home is physically affixed to the real property described above. PRINTED NAME OF OWNER(S) AS LISTED ABOVE SIGNATURE OF OWNER(S) AS LISTED ABOVE DATE This affidavit was executed in the County of \_\_\_\_\_\_ within the State of \_\_\_\_\_ Sworn to and subscribed before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_. Printed Name of Notary: \_\_ County: Signature of Notary Public Acting in: Commission Expires:

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SECTION 3. RETURN AFFIDAVIT OF AFFIXTURE TO			
NAME			
CONTACT PERSON		DAYTIME TELEPHONE NUMBER	
		( )	
ADDRESS	CITY	STATE	ZIP
CALL 517-636-7476 OR EMAIL MDOS-MobileHomeAffidavits@Michigan.gov IF YOU NEED HELP COMPLETING THIS FORM.			

Mail this completed, notarized Affidavit of Detachment of Mobile Home form to:

Michigan Department of State Office of Customer Records Vehicle Records Activity Unit PO Box 30045 Lansing, MI 48909-9798

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